

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 9 OF 25  
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)  
 Planned Parenthood Action Fund of Santa Barbara, Ventura and San Luis Obispo Counties

Full Name (Last, First, Middle Initial) of Payee  
 Progressive Digital

Mailing Address

P.O. Box 8582

City State Zip Code  
 Reston , VA 20195

Date

MM / DD / YYYY  
 10 / 23 / 2012

Amount

5,000.00

Purpose of Expenditure

Online Advertisements

Category/  
 Type 004

Office Sought: ☒ House State: CA  
☐ Senate District: 24  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
 for Office Sought 9,882.41

Disbursement For: ☐ Primary ☒ General 12  
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
 Progressive Digital

Mailing Address

P.O. Box 8582

City State Zip Code  
 Reston , VA 20195

Date

MM / DD / YYYY  
 10 / 23 / 2012

Amount

3,333.34

Purpose of Expenditure

Online Advertisement

Category/  
 Type 004

Office Sought: ☒ House State: CA  
☐ Senate District: 26  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Tony Strickland

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election  
 for Office Sought 10,385.97

Disbursement For: ☐ Primary ☒ General 12  
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee  
 Square One Consulting, LLC

Mailing Address

1382 Berkeley Ave.

City State Zip Code  
 St. Paul , MN 55105

Date

MM / DD / YYYY  
 10 / 23 / 2012

Amount

50.93

Purpose of Expenditure

Minutes for Phone Banking

Category/  
 Type 004

Office Sought: ☒ House State: CA  
☐ Senate District: 24  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Lois Capps

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
 for Office Sought 9,882.41

Disbursement For: ☐ Primary ☒ General 12  
☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures .....

8,384.27

(b) SUBTOTAL of Unitemized Independent Expenditures .....

(c) TOTAL Independent Expenditures .....  
 (carry total from last page forward to Line 7)

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